ARKANSAS REAL ESTATE COMMISSION

612 South Summit Street Little Rock, AR 72201-4701 (501) 683-8010

Website <u>www.arec.arkansas.gov</u>

APPLICATION FOR EXEMPTION TIME-SHARE PROGRAM

The following information is furnished to the Arkansas Real Estate Commission as required by Arkansas Code Ann. §18-14-203 (a)(4).

Attach additional sheets if necessary.

A.	TIME-SHARE PROJECT						
	1.	Name:					
	2.	Location:					
	3.	Address of Project:					
		City	State	Zip Code			
B.	ON-	ON-SITE INDIVIDUAL FOR CONTACT PURPOSES					
	1.	Name & Title:					
	2.	Telephone Number:					
	3.	Mailing Address:					
		City	State	Zip Code			
C.	DEV	DEVELOPER'S COMPANY/CORPORATION					
	1.	Name:					
	2.	Location:					
	3.	Name & Title of individual for contact purposes:					
	4.	Telephone Number:					
	5.	Mailing Address:					
		City	State	Zip Code			

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E.	Attach a complete copy of the Public Offering Statement currently provided to purchasers pursuant to the home state's requirement.					
F.	EXEMPTION FEE: (\$300.00)	\$				
Subm	itted by:					
(Name	2)					
(Title)						
(Signa	ture)					
Date:						